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PTO/SB/18 (08-00)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted
OR
 Declaration Submitted after Initial
With Initial Filing
Filing (surcharge
(37 CFR 1.16 (e))
required)

| | |
|--------------------------|--------------------|
| Attorney Docket Number | 713511.24 |
| First Named Inventor | Lowell, Wilhelm R. |
| COMPLETE IF KNOWN | |
| Application Number | Unknown |
| Filing Date | Herewith |
| Group Art Unit | Unknown |
| Examiner Name | Unknown |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
LAY-IN TILE SPEAKER SYSTEM

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YY)

as United States Application Number or PCT International
(if applicable).

Application Number

and was amended on (MM/DD/YY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| | | |
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[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
or Bar Code Label 27128 OR Correspondence address below

Name **Rebecca J. Brandau****Address** **Blackwell Sanders Peper Martin LLP****Address** **720 Olive Street, Suite 2400****City** **St. Louis** **State** **Missouri** **ZIP** **63101****Country** **US** **Telephone** **314-345-6000** **Fax** **314-345-6060**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--|---|--|--|
| NAME OF SOLE OR FIRST INVENTOR: | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
|--|---|--|--|

| | |
|--|--|
| Given Name (first and middle [if any]) Wilhelm R. | Family Name Or Surname Lowell |
|--|--|

| | | | |
|--|---|--|--|
| Inventor's Signature  | <input checked="" type="checkbox"/> Date 03 October 2001 | | |
|--|---|--|--|

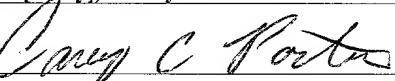
| | | | |
|--|------------------------|----------------------------|--------------------------------|
| Residence: City: St. Louis | State MO | Country U.S. | Citizenship U.S. |
|--|------------------------|----------------------------|--------------------------------|

Mailing Address **45 Log Cabin Drive****Mailing Address**

| | | | |
|------------------------------|------------------------|-------------------------|----------------------------|
| City St. Louis | State MO | ZIP 63124 | Country U.S. |
|------------------------------|------------------------|-------------------------|----------------------------|

| | | | |
|---------------------------------|---|--|--|
| NAME OF SECOND INVENTOR: | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
|---------------------------------|---|--|--|

| | |
|--|--|
| Given Name (first and middle [if any]) Carey C. | Family Name Or Surname Porter |
|--|--|

| | | | |
|---|---|--|--|
| Inventor's Signature  | <input checked="" type="checkbox"/> Date 10-3-01 | | |
|---|---|--|--|

| | | | |
|--|------------------------|----------------------------|--------------------------------|
| Residence: City Beaufort | State MO | Country U.S. | Citizenship U.S. |
|--|------------------------|----------------------------|--------------------------------|

Mailing Address **3679 Hwy. EE****Mailing Address**

| | | | |
|-----------------------------|------------------------|-------------------------|----------------------------|
| City Beaufort | State MO | ZIP 63013 | Country U.S. |
|-----------------------------|------------------------|-------------------------|----------------------------|

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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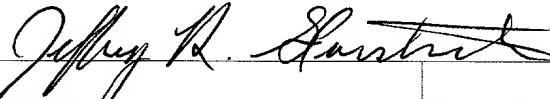
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DECLARATION — UTILITY OR DESIGN PATENT APPLICATION**ADDITIONAL INVENTOR(S)
SUPPLEMENTAL SHEET**

Attorney Docket Number: 713511.24

LAY-IN TILE SPEAKER SYSTEM

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|---|---------------|---|------------------|
| NAME OF THIRD INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name Jeffrey R. | | Family Name Or Surname Garstick | |
| Inventor's Signature  | | | Date 10/03/01 ✓ |
| Residence: City Ballwin | State MO | Country U.S. | Citizenship U.S. |
| Mailing Address 634 Huntley Heights | | | |
| Mailing Address | | | |
| City Ballwin | State MO | ZIP 63021 | Country U.S. |
| NAME OF FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name Or Surname | |
| Inventor's Signature | | | Date |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City Orlando | State Florida | ZIP 32826 | Country US |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | |

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AUTHORIZATION OF AGENT**

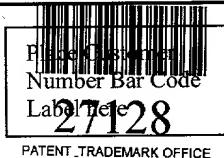
LAY-IN TILE SPEAKER SYSTEM (UPA)

| | |
|------------------------|--------------------|
| Application Number | Unknown |
| Filing Date | Herewith |
| First Named Inventor | Lowell, Wilhelm R. |
| Group Art Unit | Unknown |
| Examiner Name | Unknown |
| Attorney Docket Number | 713511.24 |

I hereby appoint:

Practitioners at Customer Number
OR
 Practitioner(s) named below:

27128



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.
OR

| | | | |
|--|-------|-----|--|
| <input type="checkbox"/> Firm or Individual Name | | | |
| Address | | | |
| Address | | | |
| City | State | Zip | |
| Country | | | |
| Telephone | Fax | | |

I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.7.1.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---|
| Name | John J. Lowell, President Lowell Manufacturing Company |
| Signature |  |
| Date | October 3 2001 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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713511.24

LAY-IN TILE SPEAKER SYSTEM

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Lowell et al.Application No./Patent No.: Not Yet Known Filed/Issue Date: HerewithEntitled: LAY-IN TILE SPEAKER SYSTEM

Lowell Manufacturing Co., a company
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
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3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

[] Additional documents in the chain of title are listed on a supplemental sheet.

[] Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Oct. 5, 2001

Date

Rebecca J. Brandau

Typed or printed name

Rebecca J. Brandau

Signature

Attorney of Record

Title

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